

DEPOSIT ACCOUNT FRAUD APPLICATION

APPLICATION FOR WARRANT
COBB COUNTY, GEORGIA

WARRANT/CITATION NO. _____

Person Making Application/Business Name _____

Street Address _____ City _____ State _____ Zip _____ Phone No. _____

I hereby make application for an **ARREST WARRANT** or **CITATION** for:

(Name and address of person whose signature is on the check) _____ Phone No. _____

(Address where check was received) _____ (Amount of check) _____ (Check No.) _____

(Date check was received) Month/Day/Year _____ (Bank listed on the check) _____

Why was the check returned from the bank? ☐ Insufficient Funds ☐ Account Closed ☐ No Account
☐ Stop Payment ☐ Other (may require bank clarification) _____

YES NO

☐ ☐ Was the check received in Cobb County?
☐ ☐ Was the check for full payment?
☐ ☐ Is the date on the check different from the date it was given to Payee/Victim?
☐ ☐ Was the check presented to bank within thirty (30) days of receipt of the check?
☐ ☐ Was identification produced and documented on check?
Name of individual who received the check: _____
Did the person who passed the check do either of the following in the presence of the person who accepted the check? A) Date the check? ____ Yes ____ No B) Sign the check? ____ Yes ____ No
The check was written for (check one): ____ Rent; ____ Wages; ____ State Taxes; ____ Loan;
____ Child Support; ____ Debt; ____ Cash; ____ Account; ____ Merchandise;
____ Other (Explain) _____
☐ ☐ Did the victim provide the merchandise, services, etc. at the time the check was presented?
If no, when were services, merchandise, etc. provided? _____
☐ ☐ At the customer's request, was this check held for a period of time?
☐ ☐ Was the certified or registered letter sent within ninety (90) days of the date of the check?
☐ ☐ Was the certified or registered letter returned to you unclaimed?
If no, who signed for the letter? _____ Date _____
☐ ☐ Was there any response from the maker of the check when contacted regarding the returned check, i.e., did the maker appear in person, write, or call? If yes, briefly explain the response: _____

The above answers are true to the best of my knowledge and belief. I make this affidavit/application so that a citation and/or warrant may be issued for the accused.

Signature _____ Date/Time _____ Receipt No. _____

Sworn and subscribed to me, this the _____ day of _____, 20 ____ .

Magistrate/Deputy Clerk _____

-----COURT USE BELOW THIS LINE-----

Citation/Warrant approved ____ Yes ____ No If not, why? _____
Criminal Code O.C.G.A. § 16-9-20: ____ Felony ____ Misdemeanor

Signature of Magistrate _____ Bond _____ Date _____